

**2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F15000004001

**FILED**  
**May 14, 2020**  
**Secretary of State**  
**7005468376CC**

**Entity Name:** HALL, RENDER, KILLIAN, HEATH & LYMAN, P.C. CORPORATION

**Current Principal Place of Business:**

500 NORTH MERIDIAN STREET  
SUITE 400  
INDIANAPOLIS, IN 46204

**Current Mailing Address:**

500 NORTH MERIDIAN STREET  
SUITE 400  
INDIANAPOLIS, IN 46204 US

**FEI Number:** 35-1427161

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title DIRECTOR  
Name SKEELS, JENNIFER  
Address 500 NORTH MERIDIAN STREET  
SUITE 400  
City-State-Zip: INDIANAPOLIS IN 46204

Title VP  
Name HEATH, TERRY  
Address 500 NORTH MERIDIAN STREET  
SUITE 400  
City-State-Zip: INDIANAPOLIS IN 46204

Title DIRECTOR  
Name DEVAUX, ARTHUR F.  
Address 500 NORTH MERIDIAN STREET  
SUITE 400  
City-State-Zip: INDIANAPOLIS IN 46204

Title SECRETARY  
Name STELLA, KEVIN  
Address 500 NORTH MERIDIAN STREET  
SUITE 400  
City-State-Zip: INDIANAPOLIS IN 46204

Title DIRECTOR  
Name KAHN, JOSEPH M.  
Address 500 NORTH MERIDIAN STREET  
SUITE 400  
City-State-Zip: INDIANAPOLIS IN 46204

Title DIRECTOR  
Name BETNER, BRIAN C.  
Address 500 NORTH MERIDIAN STREET  
SUITE 400  
City-State-Zip: INDIANAPOLIS IN 46204

Title DIRECTOR  
Name NOVA, TODD A.  
Address 500 NORTH MERIDIAN STREET  
SUITE 400  
City-State-Zip: INDIANAPOLIS IN 46204

Title PRESIDENT  
Name RYAN, JOHN  
Address 500 NORTH MERIDIAN STREET  
SUITE 400  
City-State-Zip: INDIANAPOLIS IN 46204

**Continues on page 2**

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** FRED BACHMANN

**TREASURER**

**05/14/2020**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title           TREASURER  
Name            BACHMANN, FRED  
Address         500 NORTH MERIDIAN STREET  
                  SUITE 400  
City-State-Zip: INDIANAPOLIS IN 46204

Title            CHAIRMAN OF THE BOARD  
Name            THOMPSON, WILLIAM H.  
Address         500 NORTH MERIDIAN STREET  
                  SUITE 400  
City-State-Zip: INDIANAPOLIS IN 46204

Title            DIRECTOR  
Name            HEATH, TERRY  
Address         500 NORTH MERIDIAN STREET  
                  SUITE 400  
City-State-Zip: INDIANAPOLIS IN 46204

Title            DIRECTOR  
Name            BERLIN, BILL  
Address         500 NORTH MERIDIAN STREET  
                  SUITE 400  
City-State-Zip: INDIANAPOLIS IN 46204